

=> d his

(FILE 'HOME' ENTERED AT 16:00:34 ON 03 JUN 2003)

INDEX 'ADISCTI, ADISINSIGHT, ADISNEWS, AGRICOLA, ANABSTR, AQUASCI, BIOBUSINESS, BIOCOMMERCE, BIOSIS, BIOTECHABS, BIOTECHDS, BIOTECHNO, CABA, CANCERLIT, CAPLUS, CEABA-VTB, CEN, CIN, CONFSCI, CROPB, CROPU, DDFB, DDFU, DGENE, DRUGB, DRUGLAUNCH, DRUGMONOG2, ...' ENTERED AT 16:00:49 ON 03 JUN 2003

SEA (TIGHT JUNCTION OR TJ) (15W) LEAKINESS

1 FILE AGRICOLA
7 FILE BIOSIS
3 FILE BIOTECHNO
3 FILE CABA
1 FILE CANCERLIT
8 FILE CAPLUS
5 FILE EMBASE
3 FILE ESBIODBASE
6 FILE MEDLINE
3 FILE PASCAL
5 FILE SCISEARCH
12 FILE TOXCENTER
2 FILE USPATFULL

L1 QUE (TIGHT JUNCTION OR TJ) (15W) LEAKINESS

FILE 'TOXCENTER, CAPLUS, BIOSIS, MEDLINE, EMBASE, SCISEARCH, BIOTECHNO, CABA, ESBIODBASE, PASCAL, USPATFULL, AGRICOLA, CANCERLIT' ENTERED AT 16:02:18 ON 03 JUN 2003

L2 59 S (TIGHT JUNCTION OR TJ) (15W) LEAKINESS
L3 20 DUP REM L2 (39 DUPLICATES REMOVED)
L4 2600 S (TIGHT JUNCTION OR TJ) (25W) (LEAK? OR PERME?)
L5 8 S L4 AND ESOPHAG?
L6 8 DUP REM L5 (0 DUPLICATES REMOVED)
L7 1 S L6 AND BARRETT?

INDEX 'ADISCTI, ADISINSIGHT, ADISNEWS, AGRICOLA, ANABSTR, AQUASCI, BIOBUSINESS, BIOCOMMERCE, BIOSIS, BIOTECHABS, BIOTECHDS, BIOTECHNO, CABA, CANCERLIT, CAPLUS, CEABA-VTB, CEN, CIN, CONFSCI, CROPB, CROPU, DDFB, DDFU, DGENE, DRUGB, DRUGLAUNCH, DRUGMONOG2, ...' ENTERED AT 16:16:00 ON 03 JUN 2003

SEA BARRETT? (25W) ESOPH? AND OCCLUDIN

1 FILE USPATFULL
L8 QUE BARRETT? (25W) ESOPH? AND OCCLUDIN

FILE 'USPATFULL' ENTERED AT 16:17:32 ON 03 JUN 2003

L9 1 S BARRETT? (25W) ESOPH? AND OCCLUDIN

=>

L5 ANSWER 159 OF 163 EMBASE COPYRIGHT 2003 ELSEVIER SCI. B.V.DUPLICATE 49
 AN 78390042 EMBASE
 DN 1978390042
 TI Adenocarcinoma complicating columnar epithelium-lined (**Barrett**
 's) esophagus.
 AU Haggitt R.C.; Tryzelaar J.; Ellis F.H.; Colcher H.
 CS Dept. Pathol., New England Deacon. Hosp., Boston, Mass., United States
 SO American Journal of Clinical Pathology, (1978) 70/1 (1-5).
 CODEN: AJCPAI
 CY United States
 DT Journal
 FS 005 General Pathology and Pathological Anatomy
 016 Cancer
 048 Gastroenterology
 006 Internal Medicine
 011 Otorhinolaryngology
 009 Surgery
 LA English
 AB Prolonged reflux esophagitis leads to replacement of the esophageal
 squamous epithelium by columnar epithelium in some patients. This columnar
 epithelium resembles gastric or intestinal mucosa and has been implicated
 as a precursor of esophageal adenocarcinoma. A **review** of 14
 cases of primary esophageal adenocarcinoma disclosed that 12 (86%) arose
 in a columnar epithelium-lined (**Barrett's**) esophagus. Ten of the
 12 patients had a hiatal hernia or symptoms of reflux esophagitis or both.
 In ten patients the columnar epithelium adjacent to and remote from the
 invasive adenocarcinoma showed a spectrum of abnormalities ranging from
 mild dysplasia to carcinoma in situ. These data support the concept that
 esophageal adenocarcinoma is one complication of a columnar
 epithelium-lined esophagus, and suggest that the invasive carcinoma
 evolves through a sequence of epithelial dysplasia and carcinoma in situ
 in most cases. Esophageal biopsy and cytology can detect this dysplasia,
 and should provide an effective means for monitoring patients with
Barrett's esophagus for impending **malignancy**.

=>

L5 ANSWER 157 OF 163 EMBASE COPYRIGHT 2003 ELSEVIER SCI. B.V.
 AN 83086039 EMBASE
 DN 1983086039
 TI **Barrett's** esophagus: a review.
 AU Sjogren Jr. R.W.; Johnson L.F.
 CS Gastroenterol. Serv., Walter Reed Army Med. Cent., Washington, DC 20012,
 United States
 SO American Journal of Medicine, (1983) 74/2 (313-321).
 CODEN: AJMEAZ
 CY United States
 DT Journal
 FS 006 Internal Medicine
 048 Gastroenterology
 016 Cancer
 LA English
 AB **Barretts'** esophagus may be defined as a columnar
 epithelium-lined distal esophagus. as a frequently recognized complication
 of gastroesophageal reflux, **Barrett's** esophagus has become a
 diagnosis of general clinical concern. Factors governing the development
 of this complication in patients with gastroesophageal reflux are unknown
 but may be congenitally determined in part. When symptoms are present,
 they are due to the complications of reflux, such as esophagitis,
 stricture, ulcer, or bleeding. **Barrett's** esophagus may be
 suspected on the basis of results of a barium meal test, endoscopy, or
 isotope scanning. Iodine staining at endoscopy or manometrically guided
 biospy helps to localize the abnormal mucosal segment. The diagnosis is
 proved by biopsy. The columnar epithelium of **Barrett's** esophagus
 has a **malignant** predisposition, and, once the diagnosis is made,
 periodic endoscopy, with biopsy and cytologic study, is indicated. The
 treatment of **Barrett's** esophagus is directed toward objective
 cessation of gastroesophageal reflux. In refractory cases, antireflux
 surgery improves symptoms and complications from reflux, but the columnar
 epithelium generally persists along with its malignant potential. It is
 not known whether effective antireflux treatment will lower the incidence
 of adenocarcinoma.

L14 ANSWER 2 OF 5 USPATFULL
AN 2002:72462 USPATFULL
TI Methods of diagnosing and treating small intestinal bacterial overgrowth
(SIBO) and SIBO-related conditions
IN Lin, Henry C., Manhattan Beach, CA, UNITED STATES
Pimentel, Mark, Los Angeles, CA, UNITED STATES
PI US 2002039599 A1 20020404
AI US 2001-837797 A1 20010417 (9)
RLI Continuation-in-part of Ser. No. US 1999-374142, filed on 11 Aug 1999,
PENDING Continuation-in-part of Ser. No. US 2000-546119, filed on 10 Apr
2000, PENDING Continuation-in-part of Ser. No. US 1999-420046, filed on
18 Oct 1999, PENDING Continuation-in-part of Ser. No. US 1999-359583,
filed on 22 Jul 1999, ABANDONED Continuation of Ser. No. US 1997-832307,
filed on 3 Apr 1997, GRANTED, Pat. No. US 5977175 Continuation of Ser.
No. US 1995-442843, filed on 17 May 1995, ABANDONED
DT Utility
FS APPLICATION
LREP SIDLEY & AUSTIN, 555 West Fifth Street, Los Angeles, CA, 90071-2909
CLMN Number of Claims: 45
ECL Exemplary Claim: 1
DRWN 13 Drawing Page(s)
LN.CNT 4226

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB Disclosed is a method of treating small intestinal bacterial overgrowth
(SIBO) or a SIBO-caused condition in a human subject. SIBO-caused
conditions include irritable bowel syndrome, fibromyalgia, chronic
pelvic pain syndrome, chronic fatigue syndrome, depression, impaired
mentation, impaired memory, halitosis, tinnitus, sugar craving, autism,
attention deficit/hyperactivity disorder, drug sensitivity, an
autoimmune disease, and Crohn's disease. Also disclosed are a method of
screening for the abnormally likely presence of SIBO in a human subject
and a method of detecting SIBO in a human subject. A method of
determining the relative severity of SIBO or a SIBO-caused condition in
a human subject, in whom small intestinal bacterial overgrowth (SIBO)
has been detected, is also disclosed.

SUMM . . . measured in MS patients. (J. L. Trotter et al., Serum cytokine
levels in chronic progressive multiple sclerosis: interleukin-2 levels
parallel **tumor** necrosis factor-alpha levels, J. Neuroimmunol.
33(1):29-36 [1991]; H. L. Weiner et al., Treatment of multiple
sclerosis by oral administration. . .

SUMM . . . inflammatory bowel disease, Neth. J. Med. 53(6):S24-31 [1998];
R. A. van Hogezaand and H. W. Verspaget, The future role of anti-
tumour necrosis factor-alpha products in the treatment of
Crohn's disease, Drugs 56(3):299-305 [1998]). Cytokines are small
secreted proteins or factors (5. . . H. F. Galley and N. R. Webster,
The immuno-inflammatory cascade, Br. J. Anaesth. 77:11-16 [1996]). Some
cytokines are pro-inflammatory (e.g., **tumor** necrosis factor
[TNF]-alpha., interleukin [IL]-1 (.alpha. and .beta.), IL-6, IL-8,
IL-12, or leukemia inhibitory factor [LIF]); others are
anti-inflammatory (e.g., . . .

SUMM . . . in the treatment of Crohn's disease. (S. R. Targan et al., A
short-term study of chimeric monoclonal antibody cA2 to **tumor**
necrosis factor alpha for Crohn's disease. Crohn's Disease cA2 Study
Group, N. Engl. J. Med. 337(15):1029-35 [1997]; W. A. Stack et al.,
Randomised controlled trial of CDP571 antibody to **tumour**
necrosis factor-alpha in Crohn's disease, Lancet 349(9051):521-24
[1997]; H. M. van Dullemen et al., Treatment of Crohn's disease with
anti-**tumor** necrosis factor chimeric monoclonal antibody (cA2),
Gastroenterol. 109(1):129-35 [1995]).

SUMM . . . common chronic adverse effect of opioid pain medications in
patients who require long-term opioid administration, such as patients

with advanced **cancer** or participants in methadone maintenance, has been treated with orally administered methylnaltrexone and naloxone. (Yuan, C. S. et al., Methylnaltrexone. . . .

DETD . . . except the cecum, colon, rectum, and anus. While some digestive processes, such as starch hydrolysis, begin in the mouth and **esophagus**, of particular importance as sites of digestion are the stomach and small intestine (or "small bowel"). The small intestine includes. . . .

DETD . . . vivo, Clin. Chim. Acta 263(2):197-205 [1997]; Fleming, S. C. et al., Measurement of sugar probes in serum: an alternative to **urine** measurement in intestinal permeability testing, Clin. Chem. 42(3):445-48 [1996]).

DETD [0134] Briefly, intestinal permeability is typically accomplished by measuring the relative serum or **urine** levels of two sugars, after ingestion of controlled amounts by the subject. One of the sugars, for example **mannitol**, is chosen because it is more typically more easily absorbed through the intestinal mucosa than the other sugar, for example, lactulose. Then about two hours after ingestion, a serum or **urine** sample is taken, and the ratio of the two sugars is determined. The closer the ratio of the two sugars. . . .

DETD . . . the instant invention, is any amount of active lipid that can trigger any or all of the following reflexes: intestino-lower **esophageal** sphincter (relaxation of LES); intestino-gastric feedback (inhibition of gastric emptying); intestino-intestinal feedback (ileo-jejunal feedback/ileal brake, jejuno-jejunal feedback/jejunal brake, intestino-CNS feedback. . . .

DETD . . . disease; irritable bowel syndrome; short bowel syndrome; Indiana pouch; AIDS; ulcerative colitis; vagotomy; antrectomy; ileostomy; partial and complete colectomy; colon **cancer**; diabetes mellitus type 1; pancreatic insufficiency; radiation enteropathy; **esophagectomy**/gastric pull-up; total and subtotal gastrectomy; gastorjejunostomy), made by referring gastroenterologists. The method was the same as described above, except oleic. . . .

=>

L14 ANSWER 2 OF 5 USPATFULL
AN 2002:72462 USPATFULL
TI Methods of diagnosing and treating small intestinal bacterial overgrowth
(SIBO) and SIBO-related conditions
IN Lin, Henry C., Manhattan Beach, CA, UNITED STATES
Pimentel, Mark, Los Angeles, CA, UNITED STATES
PI US 2002039599 A1 20020404
AI US 2001-837797 A1 20010417 (9)
RLI Continuation-in-part of Ser. No. US 1999-374142, filed on 11 Aug 1999,
PENDING Continuation-in-part of Ser. No. US 2000-546119, filed on 10 Apr
2000, PENDING Continuation-in-part of Ser. No. US 1999-420046, filed on
18 Oct 1999, PENDING Continuation-in-part of Ser. No. US 1999-359583,
filed on 22 Jul 1999, ABANDONED Continuation of Ser. No. US 1997-832307,
filed on 3 Apr 1997, GRANTED, Pat. No. US 5977175 Continuation of Ser.
No. US 1995-442843, filed on 17 May 1995, ABANDONED
DT Utility
FS APPLICATION
LN.CNT 4226
INCL INCLM: 424/558.000
INCLS: 514/714.000; 514/002.000
NCL NCLM: 424/558.000
NCLS: 514/714.000; 514/002.000
IC [7]
ICM: A61K035-22
ICS: A61K035-23; A01N031-00; A61K038-00

L18 ANSWER 25 OF 29 EMBASE COPYRIGHT 2003 ELSEVIER SCI. B.V.
AN 80215921 EMBASE
DN 1980215921
TI [Acute renal failure. Incidence, pathophysiology, prevention, therapy and prognosis].
AKUTES NIERENVERSAGEN. HAUFIGKEIT, PATHOPHYSIOLOGIE, PRAVENTION, THERAPIE UND PROGNOSE.
AU Klinkmann H.
CS Klin. Inn. Med., Ber. Med., Wilhelm-Pieck-Univ., 25 Rostock, Germany
SO Anaesthesiologie und Reanimation, (1980) 5/2 (67-72).
CODEN: ANREDN
CY Germany
DT Journal
FS 037 Drug Literature Index
024 Anesthesiology
028 Urology and Nephrology
LA German
SL English
AB According to annually published central statistics in the GDR, the number of patients who have been treated in kidney centres for dialysis in the last 6 years amounted to about 500 per year and has remained constant. 45% of the cases are of surgical or urological origin. From the pathophysiological point of view the Thureau mechanism and the renin angiotensin system have still to be considered regulating factors. Besides the known biochemical parameters, the **urine**/plasma osmolarity quotient, the degree of acidosis and the **mannitol** test are of particular importance in the **diagnosis**. The application of diuretics and hyperosmolaric infusions plays an important role in the prevention of acute renal failure. In the state of acute renal failure the early use of dialysis and sufficient application of calories in connection with balancing the acid-base status are the most important therapeutic measures..

5/10/02

8 ANSWER 13 OF 29 USPATFULL

AN 1999:132521 USPATFULL

TI Sucrose detection by enzyme-linked immunosorbant assay

IN Borgford, Thor Jon, Burnaby, Canada

Racher, Kathleen Iris, West Vancouver, Canada

Braun, Curtis Archie John, Burnaby, Canada

PA De Novo Enzyme Corporation, Burnaby, Canada (non-U.S. corporation)

PI US 5972631 19991026

AI US 1997-962723 19971103 (8)

DT Utility

FS Granted

EXNAM Primary Examiner: Chin, Christopher L.; Assistant Examiner: Nguyen, Bao-Thuy L.

LREP Fitzpatrick, Cella Harper & Scinto

CLMN Number of Claims: 13

ECL Exemplary Claim: 1

DRWN 4 Drawing Figure(s); 2 Drawing Page(s)

LN.CNT 855

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB A method is described for the rapid, sensitive and accurate determination of sucrose in biological fluids. A substrate is pre-coated with a glucose or fructose polymer and a transglycosidase enzyme. When the coated substrate is incubated with biological fluids containing concentrations of sucrose, the transglycosidase enzyme transfers monomers of glucose or fructose from the sucrose to the glucose or fructose polymer. The dimensions of the polymer are increased in proportion to the sucrose concentration of the samples. Newly formed polymer is subsequently quantitated in an immunoassay which employs either a combination of a carbohydrate-binding protein (which may be an antibody) and a conjugate of a secondary antibody and a marker enzyme, or a conjugate of a carbohydrate-binding protein and a marker enzyme. The assay is accurate at sucrose concentrations below 1 $\mu\text{g/mL}$. No interference was observed at glucose concentrations as high as 25 mM. The **sucrose** detection assay is particularly useful in a non-invasive **diagnostic** test for gastric damage.

d 118 4 8 13-29 bib ab

L18 ANSWER 4 OF 29 USPATFULL

AN 2002:290528 USPATFULL
TI Kit for use in detecting gastric damage
IN Thompson, Glenn L., Waterdown, CANADA
Giampuzzi, Dan, Mississauga, CANADA
PA G. D. Searle & Co., Chicago, IL, United States (U.S. corporation)
PI US 6475442 B1 20021105
AI US 1998-38688 19980309 (9)
DT Utility
FS GRANTED
EXNAM Primary Examiner: Alexander, Lyle A.
LREP Fitzpatrick, Cella, Harper & Scinto
CLMN Number of Claims: 16
ECL Exemplary Claim: 1
DRWN 1 Drawing Figure(s); 1 Drawing Page(s)
LN.CNT 289

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB This invention provides a kit for use in a method for detecting gastric damage. The kit comprises: (a) a sealed container of sterilized buffered aqueous sucrose solution; and (b) a urine collection device suitable for collection and storage of human urine.

L18 ANSWER 8 OF 29 USPATFULL

DUPLICATE 1

AN 2001:125513 USPATFULL
TI Diagnostic kit for assaying sucrose in physiological fluids
IN Romaschin, Alex D., 3 Broadfield Drive, Etobicoke, Ontario, Canada M9C 1L4
PI US 6270725 B1 20010807
AI US 1998-37977 19980309 (9)
DT Utility
FS GRANTED
EXNAM Primary Examiner: Alexander, Lyle A.
LREP Fitzpatrick, Cella, Harper & Scinto
CLMN Number of Claims: 11
ECL Exemplary Claim: 1
DRWN No Drawings
LN.CNT 586

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB This invention provides a kit and a method for detecting sucrose in physiological fluids and said method. The kit comprises: (a) a solid mixture comprising ATP, NAD, hexokinase, G-6-PDH, and a buffer; which, after reconstitution with water, results in a solution having a pH in the range from about 7 to about 8; and (b) a solid mixture comprising ATP, NAD, hexokinase, G-6-PDH, invertase, and a buffer; which, after reconstitution with water, results in a solution having a pH in the range from about 7 to about 8.

L18 ANSWER 13 OF 29 USPATFULL

AN 1999:132521 USPATFULL
TI Sucrose detection by enzyme-linked immunosorbant assay
IN Borgford, Thor Jon, Burnaby, Canada
Racher, Kathleen Iris, West Vancouver, Canada
Braun, Curtis Archie John, Burnaby, Canada
PA De Novo Enzyme Corporation, Burnaby, Canada (non-U.S. corporation)
PI US 5972631 19991026
AI US 1997-962723 19971103 (8)
DT Utility
FS Granted
EXNAM Primary Examiner: Chin, Christopher L.; Assistant Examiner: Nguyen, Bao-Thuy L.

LREP Fitzpatrick, Cella Harper & Scinto
CLMN Number of Claims: 13
ECL Exemplary Claim: 1
DRWN 4 Drawing Figure(s); 2 Drawing Page(s)
LN.CNT 855

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB A method is described for the rapid, sensitive and accurate determination of sucrose in biological fluids. A substrate is pre-coated with a glucose or fructose polymer and a transglycosidase enzyme. When the coated substrate is incubated with biological fluids containing concentrations of sucrose, the transglycosidase enzyme transfers monomers of glucose or fructose from the sucrose to the glucose or fructose polymer. The dimensions of the polymer are increased in proportion to the sucrose concentration of the samples. Newly formed polymer is subsequently quantitated in an immunoassay which employs either a combination of a carbohydrate-binding protein (which may be an antibody) and a conjugate of a secondary antibody and a marker enzyme, or a conjugate of a carbohydrate-binding protein and a marker enzyme. The assay is accurate at sucrose concentrations below 1 .mu.g/mL. No interference was observed at glucose concentrations as high as 25 mM. The **sucrose** detection assay is particularly useful in a non-invasive **diagnostic** test for gastric damage.

L18 ANSWER 14 OF 29 CAPLUS COPYRIGHT 2003 ACS

AN 1999:361898 CAPLUS

DN 131:56143

TI Immunoassay test element

IN Okamura, Tomosato; Isomura, Mitsuo; Ashihara, Yoshihiro

PA Fujirebio, Inc., Japan

SO Jpn. Kokai Tokkyo Koho, 7 pp.

CODEN: JKXXAF

DT Patent

LA Japanese

FAN.CNT 1

	PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI	JP 11153600	A2	19990608	JP 1997-336594	19971121
PRAI	JP 1997-336594		19971121		

AB The disclosed test element comprises (a) developing area contg. sugar, urea, and mixt. of antigen or antibody as zone 1 for detection; (b) developing soln.-supplying zone 2; (c) labeled reagent-contg. zone 3; (d) sample application zone 4; and (e) developing soln.-absorbing zone 5. The immunoassay test element is useful for simple, rapid and accurate detn. of antigen, antibody, or other biol. active substance in clin. sample. Thus, a such test element contg. sucrose, urea, and alk. phosphatase-labeled hepatitis B surface antigen was prepd. for detecting anti-hepatitis B virus in blood, blood serum, blood plasma, **urine**, lymph, and other body fluid; and for **diagnosing** hepatitis B virus infection. Similarly, test elements contg. labeled HCV antigen and anti-Hb antibody were prepd. and used for diagnosis of hepatitis C virus infection and fecal occult blood.

L18 ANSWER 15 OF 29 CAPLUS COPYRIGHT 2003 ACS

AN 1997:210985 CAPLUS

DN 126:197111

TI Reactor for measuring D-sorbitol as diagnostic indicator

IN Tanabe, Toshio; Masuda, Minoru; Yabuchi, Masahiko; Ikemoto, Masahiro; Okamoto, Hidesato; Kuroda, Masako

PA Nippon Kayaku Kk, Japan; Ikeda Shotsuken Kk

SO Jpn. Kokai Tokkyo Koho, 9 pp.

CODEN: JKXXAF

DT Patent

LA Japanese

FAN.CNT 1

	PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI	JP 09023897	A2	19970128	JP 1995-200430	19950713
PRAI	JP 1995-200430		19950713		

AB A minute quantity of D-sorbitol in biol. samples like blood serum, urine, and red blood cells is detd. by combination of (1) HPLC for D-sorbitol isolation and (2) a reactor wherein D-sorbitol oxidase and peroxidase are immobilized in the flow-injection anal. This is a simple and accurate method for diagnosing diabetes and renal diseases.

L18 ANSWER 16 OF 29 USPATFULL

AN 96:50780 USPATFULL

TI N- and O-substituted aminophenols, method and use for diagnosis

IN Zimmermann, Gerd, Mannheim, Germany, Federal Republic of

Mangold, Dieter, Maxdorf, Germany, Federal Republic of

PA Boehringer Mannheim GmbH, Mannheim, Germany, Federal Republic of (non-U.S. corporation)

PI US 5525480 19960611

AI US 1994-257688 19940609 (8)

RLI Division of Ser. No. US 1990-633231, filed on 21 Dec 1990, now patented, Pat. No. US 5334505

PRAI DE 1989-3942355 19891221

DT Utility

FS Granted

EXNAM Primary Examiner: Robinson, Douglas W.; Assistant Examiner: Leary, Louise N.

LREP Felfe & Lynch

CLMN Number of Claims: 31

ECL Exemplary Claim: 1

DRWN 7 Drawing Figure(s); 6 Drawing Page(s)

LN.CNT 3195

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB The present invention provides N- and O-substituted aminophenol derivatives of the general formula ##STR1## wherein R.sup.1, R.sup.2, R.sup.3, G and L are as hereinbefore defined. The present invention also provides intermediates for the preparation of these aminophenol derivatives of general formula (I), as well as the use of the aminophenol derivatives of general formula (I) for the determination of hydrolases, as well as for the preparation of agents for carrying out determinations of hydrolysis.

L18 ANSWER 17 OF 29 USPATFULL

AN 95:50068 USPATFULL

TI Detection of brain .alpha.1-antichymotrypsin

IN Johnson-Wood, Kelly, Belmont, CA, United States

Schenk, Dale, Pacifica, CA, United States

PA Athena Neurosciences, Inc., South San Francisco, CA, United States (U.S. corporation)

PI US 5422244 19950606

AI US 1992-880216 19920505 (7)

DT Utility

FS Granted

EXNAM Primary Examiner: Bidwell, Carol E.

CLMN Number of Claims: 26

ECL Exemplary Claim: 17

DRWN 3 Drawing Figure(s); 1 Drawing Page(s)

LN.CNT 1421

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB The present invention is related generally to methods and compositions for identifying and quantitating particular .alpha.1-antichymotrypsin

species in a biological sample. More particularly, the present invention is related to methods and compositions for detecting and measuring a brain .alpha.1-antichymotrypsin species that is produced in brain tissue of individuals having a neuropathological condition and which is detectable in accessible biological samples. The invention provides detection assays, such as sandwich binding assays, for detecting and quantitating brain .alpha.1-antichymotrypsin in a biological sample, such as blood, **urine**, cerebrospinal fluid, or tissue. These detection assays are useful for detecting and **diagnosing** neuropathological diseases and for identifying cells of a human central nervous system lineage, and for other medical applications. The invention also provides binding components, such as antibodies that bind to brain .alpha.1-antichymotrypsin, and which have potential therapeutic and diagnostic medical imaging applications.

L18 ANSWER 18 OF 29 USPATFULL

AN 94:66398 USPATFULL

TI N- and O-substituted aminophenols, method and use for diagnosis

IN Zimmermann, Gerd, Mannheim, Germany, Federal Republic of
Mangold, Dieter, Maxdorf, Germany, Federal Republic of

PA Boehringer Mannheim GmbH, Mannheim, Germany, Federal Republic of
(non-U.S. corporation)

PI US 5334505 19940802

AI US 1990-633231 19901221 (7)

PRAI DE 1989-3942355 19891221

DT Utility

FS Granted

EXNAM Primary Examiner: Wityshyn, Michael G.; Assistant Examiner: Leary,
Louise N.

LREP Felfe & Lynch

CLMN Number of Claims: 15

ECL Exemplary Claim: 1

DRWN 7 Drawing Figure(s); 6 Drawing Page(s)

LN.CNT 2511

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB The present invention provides N- and O-substituted aminophenol derivatives of the general formula ##STR1## wherein R.sup.1, R.sup.2, R.sup.3, G and L are as hereinbefore defined. The present invention also provides intermediates for the preparation of these aminophenol derivatives of general formula (I), as well as the use of the aminophenol derivatives of general formula (I) for the determination of hydrolyses, as well as for the preparation of agents for carrying out determinations of hydrolyses.

L18 ANSWER 19 OF 29 CAPLUS COPYRIGHT 2003 ACS

AN 1992:507527 CAPLUS

DN 117:107527

TI Detection of metabolic diseases by thin layer chromatography

AU Hsieh, Monica C.; Berry, Helen K.

CS Metab. Nutr. Lab., Child. Hosp. Res. Inst., Oakland, CA, 94609, USA

SO Journal of Planar Chromatography--Modern TLC (1992), 5(2), 118-23

CODEN: JPCTE5; ISSN: 0933-4173

DT Journal

LA English

AB The presence of abnormal metabolites of amino acids (AA), org. acids (OA), phenolic acids (PA), sugars (SU), and mucopolysaccharides (MPS) can easily be detected by metabolic screening: OA, PA, MPS and proteins can be detd. by one-dimensional TLC on cellulose whereas AAs are analyzed by two-dimensional TLC, again on cellulose. Each class of compd. is visualized by spraying with specific reagents, and semi-quant. estn. accomplished by comparing the test specimen with known concns. of stds. applied to the sample plate. No sophisticated instruments or expensive

reagents are needed for the procedure and the TLC protocol for metabolic screening is a powerful means of obtaining a biochem. overview of sick patients. Information from the tests enables the physician and investigator to select specific tests for final diagnosis.

L18 ANSWER 20 OF 29 CAPLUS COPYRIGHT 2003 ACS
 AN 1992:102001 CAPLUS
 DN 116:102001
 TI High-performance liquid chromatography of urinary oligosaccharides in the diagnosis of glycoprotein degradation disorders
 AU Hommes, Frits A.; Varghese, Molykutti
 CS Dep. Biochem. Mol. Biol., Med. Coll. Georgia, Augusta, GA, 30912-2100, USA
 SO Clinica Chimica Acta (1991), 203(2-3), 211-24
 CODEN: CCATAR; ISSN: 0009-8981
 DT Journal
 LA English
 AB Urinary oligosaccharides can be sepd. by high-performance anion-exchange chromatog. using a Dionex CarboPac PA1 column, elution with aq. NaOH and NaOAc solns., and detection by pulsed amperometry. Each of the urines of patients with glycoprotein degrading disorders yielded a pattern of oligosaccharide excretion unique for that disorder, facilitating an unambiguous diagnosis. The method is sensitive (10 μ L urine required) and fast (40 min).

L18 ANSWER 21 OF 29 CAPLUS COPYRIGHT 2003 ACS
 AN 1990:527184 CAPLUS
 DN 113:127184
 TI Enzyme immunoassays and immunologic reagents for home diagnostic application
 IN Block, Elliott; Bahar, Izak; Cole, Frank; Eaton, Cheryl A.; Jones, Wendy; Sigillo, Eric; Coseo, Mary; Cicia, Nancy J.; Cannon, L. Edward; Cantarow, Walter
 PA Hygeia Sciences, Inc., USA
 SO U.S., 15 pp. Cont. of U.S. Ser. No. 747,605, abandoned.
 CODEN: USXXAM
 DT Patent
 LA English
 FAN.CNT 2

	PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI	US 4931385	A	19900605	US 1988-275656	19881121
	US 5102788	A	19920407	US 1989-344575	19890428
PRAI	US 1983-473907		19830310		
	US 1985-747605		19850624		
	US 1988-275656		19881121		
AB	Enzyme immunoassays, esp. ELISAs, for home diagnostic application under ambient room temp. and humidity, use a lyophilized mixt. contg. peroxidase-antibody conjugate, a binding-enhancer (e.g. PEG, polyvinyl alc., polyvinyl pyrrolidone, and dextran), a water-sol. nonionic surfactant in an amt. sufficient to provide detergency without having a deleterious effect on the conjugate, and a sugar (dextrin or trehalose). For an ELISA, a solid support is precoated with another antibody and then is treated with a blocking soln. comprising a blocking agent (bovine serum albumin, gelatin, milk proteins, or nonspecific IgG) and a water-sol. sugar. Both the lyophilized antibody conjugate mixt. and the immobilized antibody have preserved reactivity and immunolysis binding specificity even if exposed to high humidity and temps. of 80-120.degree.F prior to their use in the immunoassay. A diagnostic kit for the ELISA is disclosed. An ELISA for human chorionic gonadotropin (hCG) in urine used (1) lyophilized mixt. contg. peroxidase conjugated with a monoclonal antibody to the β -chain of hCG, PEG, Hepes salt, Hepes acid, di-Na EDTA, MgSO ₄ , dextrin, and IGEPAL CA-630 (octylphenoxypoly(ethyleneoxy)etha				

nol); (2) dipsticks coated with monoclonal antibody to hCG and treated with bovine serum albumin and sucrose in the blocking soln.; and (3) a chromogen soln. contg. tetramethylbenzidine, buffer, and H2O2. Urine was added to the conjugate mixt. and the dipstick was immersed in the soln. for >15 min. The dipstick was removed, washed with tap water, and dipped in the chromogen soln. for >5 min. When hCG was present, the dipstick changed from colorless to blue-green.

L18 ANSWER 22 OF 29 DRUGU COPYRIGHT 2003 THOMSON DERWENT
AN 1989-44286 DRUGU P
TI Extrahepatic Morphine Metabolism in Man During the Anhepatic Phase of Orthotopic Liver Transplantation.
AU Bodenham A; Quinn K; Park G R
LO Cambridge, United Kingdom
SO Br.J.Anaesth. (63, No. 4, 380-84, 1989) 1 Fig. 3 Tab. 28 Ref.
CODEN: BJANAD ISSN: 0007-0912
AV Department of Anesthetics, St. James Hospital, Becket St., Leeds LS9 7TF, England.
LA English
DT Journal
FA AB; LA; CT; MPC
FS Literature
AB No significant metabolism of i.v. morphine (M) occurred in the anhepatic phase in 7 patients undergoing orthotopic liver transplantation. Plasma and urinary M-3-glucuronide (M3G) and M-6-glucuronide (M6G) were measured. The results suggest that the liver is the primary site of M metabolism in these patients. Anesthesia was with thiopental, N2O and isoflurane in O2, neuromuscular block was with suxamethonium and atracurium, and analgesia with fentanyl. **Urine** output was maintained with dopamine and **mannitol**. **Diagnoses** included primary biliary cirrhosis with hepatoma, liver carcinoma, sclerosing cholangitis and cholangiocarcinoma, chronic active hepatitis and alcoholic cirrhosis.

L18 ANSWER 23 OF 29 WPIDS (C) 2003 THOMSON DERWENT
AN 1988-270456 [38] WPIDS
CR 1988-077354 [11]
DNN N1988-205346 DNC C1988-120411
TI Urine specimen bacteriostatic maintenance compsn. - comprises liq. compsn. of boric acid, sodium borate, water and mannitol.
DC B04 J04 Q34
IN DESAI, J S; MEHL, J J
PA (BECT) BECTON DICKINSON CO
CYC 1
PI US 4768653 A 19880906 (198838)* 6p
ADT US 4768653 A US 1987-139224 19871229
PRAI US 1982-378586 19820517; US 1982-437411 19821028; US 1987-139224 19871229
AB US 4768653 A UPAB: 19930923
A device for maintaining urine specimens comprises (a) an evacuated specimen container, (b) a liq. compsn. for the bacteriostatic maintenance of urine specimens in the container, with (i) the liquid compsn. comprising (1) boric acid, (2) sodium borate, (3) water and (4) mannitol, (ii) the boric acid, sodium borate and mannitol being dissolved in the compsn. to provide 0.45-0.55% boric acid, 1.08-1.32% sodium borate and 0.9-1.1% mannitol in a urine sample introduced into the device and (iii) the boric acid, sodium borate, water and mannitol being present in amts. effective for providing a maintenance compsn. for a urine sample.
The compsn. may also include sodium acetate, glutamine and a non-ionic polysorbate surfactant e.g. polyoxyethylene sorbitan monooleate.
USE/ADVANTAGE - Urine specimens are maintained from the addn. of the specimen until such time as testing takes place without any other

preservation e.g. refrigeration. The compsn. prevents additional growth of bacteria so that a precise accurate specimen is present for examination. The compsn. contg. **mannitol** can be lyophilised rapidly, is stable and has reduced light sensitive properties. The specific gravity of the **urine** remains within **diagnostic** tolerances when the sample is added to the maintenance fluid.
0/1

L18 ANSWER 24 OF 29 BIOSIS COPYRIGHT 2003 BIOLOGICAL ABSTRACTS INC.
AN 1983:38943 BIOSIS
DN BR24:38943
TI CHANGES IN SMALL INTESTINAL PERMEABILITY REFLECT THE DEGREE OF ABNORMALITY IN CELIAC PATIENTS ON A GLUTEN-FREE DIET.
AU COOPER B T; UKABAM S O
CS UNIV. DEP. MED., BRISTOL ROYAL INFIRMARY, BRISTOL, BS2 8HW.
SO A COMBINED MEETING OF THE MEDICAL RESEARCH SOCIETY AND THE SCOTTISH SOCIETY OF EXPERIMENTAL MEDICINE, EDINBURGH, SCOTLAND, JULY 9-10, 1982. CLIN SCI (LOND). (1982) 63 (3), 21P.
CODEN: CSCIAE. ISSN: 0143-5221.
DT Conference
FS BR; OLD
LA English

L18 ANSWER 25 OF 29 EMBASE COPYRIGHT 2003 ELSEVIER SCI. B.V.
AN 80215921 EMBASE
DN 1980215921
TI [Acute renal failure. Incidence, pathophysiology, prevention, therapy and prognosis].
AKUTES NIERENVERSAGEN. HAUFIGKEIT, PATHOPHYSIOLOGIE, PRAVENTION, THERAPIE UND PROGNOSE.
AU Klinkmann H.
CS Klin. Inn. Med., Ber. Med., Wilhelm-Pieck-Univ., 25 Rostock, Germany
SO Anaesthesiologie und Reanimation, (1980) 5/2 (67-72).
CODEN: ANREDN
CY Germany
DT Journal
FS 037 Drug Literature Index
024 Anesthesiology
028 Urology and Nephrology
LA German
SL English
AB According to annually published central statistics in the GDR, the number of patients who have been treated in kidney centres for dialysis in the last 6 years amounted to about 500 per year and has remained constant. 45% of the cases are of surgical or urological origin. From the pathophysiological point of view the Thureau mechanism and the renin angiotensin system have still to be considered regulating factors. Besides the known biochemical parameters, the **urine**/plasma osmolarity quotient, the degree of acidosis and the **mannitol** test are of particular importance in the **diagnosis**. The application of diuretics and hyperosmolaric infusions plays an important role in the prevention of acute renal failure. In the state of acute renal failure the early use of dialysis and sufficient application of calories in connection with balancing the acid-base status are the most important therapeutic measures..

L18 ANSWER 26 OF 29 DRUGB COPYRIGHT 2003 THOMSON DERWENT
AN 1978-11864 DRUGB T S
TI BETA2MICROGLOBULINURIA IN A PATIENT WITH NEPHROTOXICITY SECONDARY TO MERCURIC CHLORIDE INGESTION.
AU PESCE A J; HANENSON I; SETHI K
LO CINCINNATI, OHIO, USA.

SO CLIN.TOXICOL. (11, NO.3, 309-15, 1977)
DT Journal

L18 ANSWER 27 OF 29 DRUGB COPYRIGHT 2003 THOMSON DERWENT
AN 1966-05236 DRUGB P B
TI SUCROSURIA OR HYSTERIA.
AU JACOBS P
LO ROTTERDAM, NETH.
SO CLIN.CHIM.ACTA (13, NO.1, 113-16, 1966)
DT Journal

L18 ANSWER 28 OF 29 DRUGB COPYRIGHT 2003 THOMSON DERWENT
AN 1965-32722 DRUGB P
TI DISACCHARIDURIA IN MALIGNANT DISEASE.
AU FISCHER R A; ROSOFF B M; ALTSHULER J H; THAYER W R JR.; SPIRO H M
LO NEW HAVEN, CONN.
SO CANCER (18, NO.10, 1278-84, 1965)
DT Journal

L18 ANSWER 29 OF 29 BIOCOMMERCE COPYRIGHT 2003 BioCommerce Data Ltd.
AN 0114479 BIOCOMMERCE FS Abstract
CO Searle, G.D. and Co (80), USA
Toronto General Hospital (13805), Canada
Calgary, University of (3817), Canada
Medical Research Council, Canada (5347), Canada
SO Genesis Report/Dx, MAY 1994, vol. 36, Page(s) 34-35.
TC (Company information)
AB G D Searle is commercialising a diagnostic test developed at the
University of Calgary which detects gastric damage by measuring
sucrose levels in **urine**. The test will be marketed to
screen people at risk of gastric ulcers before standard **diagnostic**
procedures for ulcers are used.

=> d l18 24 all

L18 ANSWER 24 OF 29 BIOSIS COPYRIGHT 2003 BIOLOGICAL ABSTRACTS INC.
AN 1983:38943 BIOSIS
DN BR24:38943
TI CHANGES IN SMALL INTESTINAL PERMEABILITY REFLECT THE DEGREE OF ABNORMALITY
IN CELIAC PATIENTS ON A GLUTEN-FREE DIET.
AU COOPER B T; UKABAM S O
CS UNIV. DEP. MED., BRISTOL ROYAL INFIRMARY, BRISTOL, BS2 8HW.
SO A COMBINED MEETING OF THE MEDICAL RESEARCH SOCIETY AND THE SCOTTISH
SOCIETY OF EXPERIMENTAL MEDICINE, EDINBURGH, SCOTLAND, JULY 9-10, 1982.
CLIN SCI (LOND). (1982) 63 (3), 21P.
CODEN: CSCIAE. ISSN: 0143-5221.
DT Conference
FS BR; OLD
LA English
CC General Biology - Symposia, Transactions and Proceedings of Conferences,
Congresses, Review Annuals 00520
Clinical Biochemistry; General Methods and Applications *10006
Biochemical Studies - Proteins, Peptides and Amino Acids 10064
Biochemical Studies - Carbohydrates 10068
Movement 12100
Pathology, General and Miscellaneous - Diagnostic 12504
Pathology, General and Miscellaneous - Therapy 12512
Metabolism - Carbohydrates *13004
Metabolism - Proteins, Peptides and Amino Acids *13012
Nutrition - Prophylactic and Therapeutic Diets *13218
Nutrition - Proteins, Peptides and Amino Acids *13224

Digestive System - Pathology *14006
Urinary System and External Secretions - Physiology and Biochemistry
15504
Plant Physiology, Biochemistry and Biophysics - Chemical Constituents
51522

BC Gramineae 25305
Hominidae 86215
IT Miscellaneous Descriptors
ABSTRACT JEJUNUM URINE MANNITOL LACTULOSE
DIAGNOSIS
RN 4618-18-2 (LACTULOSE)
69-65-8Q, 87-78-5Q (MANNITOL)

=> d 118 8 kwic

L18 ANSWER 8 OF 29 USPATFULL DUPLICATE 1
SUMM . . . the extent of gastric epithelial damage. Typically, the
disaccharide is administered to a patient, followed by collection of
blood or **urine**, which is assayed for the disaccharide. The use
of **sucrose** in particular as a **diagnostic** marker in
detection of gastric epithelial damage is described in U.S. patent
application Ser. No. 08/456,203.
SUMM . . . be useful for analyzing physiological fluids. A
hexokinase/glucose-6-phosphate method has been suggested for analysis of
glucose in serum, plasma, or **urine**. United States Department
of Health, Education and Welfare, Food and Drug Administration. In Vitro
Diagnostic Products for Human Use, Proposed Establishment of
Product Class Standard for Detection or Measurement of Glucose, Fed.
Regist. Vol. 39,. . .
SUMM A method suitable for determination of **sucrose** in
physiological fluids would be highly desirable, as would a
diagnostic kit containing the necessary reagents preformulated
for use in such a method.

=> d 118 21 19 20 kwic

L18 ANSWER 21 OF 29 CAPLUS COPYRIGHT 2003 ACS
IT **Urine** analysis
(human chorionic gonadotropin and LH detn. in, by home
diagnostic ELISA, heat- and humidity-stable reagents for)
IT 57-50-1, **Sucrose**, biological studies
RL: BIOL (Biological study)
(blocking soln. contg. bovine serum albumin and, for stable
antibody-coated dipstick for home **diagnostic** ELISA)
L18 ANSWER 19 OF 29 CAPLUS COPYRIGHT 2003 ACS
IT 50-99-7, Glucose, analysis 51-35-4, Hydroxyproline 56-40-6, Glycine,
analysis 57-48-7, Fructose, analysis 57-50-1, **Sucrose**,
analysis 59-23-4, Galactose, analysis 63-42-3, Lactose 147-85-3,
Proline, analysis 156-38-7, p-Hydroxyphenylacetic acid 306-23-0
614-75-5, o-Hydroxyphenylacetic acid
RL: ANT (Analyte); ANST (Analytical study)
(detection of, in human **urine** by TLC for metabolic disease
diagnosis)
L18 ANSWER 20 OF 29 CAPLUS COPYRIGHT 2003 ACS
ST **urine** oligosaccharide detn HPLC **diagnosis**; anion
exchange liq chromatog oligosaccharide; glycoprotein degrdn disorder
diagnosis; amperometry oligosaccharide detn urine
IT Monosaccharides

Oligosaccharides

Sialic acids

RL: ANT (Analyte); ANST (Analytical study)

(detn. of, in human **urine** by high-performance anion-exchange
liq. chromatog., disease **diagnosis** in relation to)

IT **Urine** analysis

(oligosaccharides detn. in human, by high-performance anion-exchange
liq. chromatog. with amperometric detection, **diagnosis** in
relation to)

IT Oligosaccharides

RL: ANT (Analyte); ANST (Analytical study)

(di-, detn. of, in human **urine** by high-performance
anion-exchange liq. chromatog., disease **diagnosis** in relation
to)

IT 57-50-1, **Sucrose**, analysis 69-79-4, Maltose 87-79-6, Sorbose
685-73-4, Galacturonic acid 6556-12-3, Glucuronic acid

RL: ANT (Analyte); ANST (Analytical study)

(detn. of, in human **urine** by high-performance anion-exchange
liq. chromatog., disease **diagnosis** in relation to)

IT 50-70-4, D-Glucitol, analysis 50-99-7, Glucose, analysis 57-48-7,
Fructose, analysis 59-23-4, Galactose, analysis 63-42-3, Lactose
99-20-7, Trehalose 499-40-1, Isomaltose 1811-31-0,
N-Acetylgalactosamine 2438-80-4, Fucose 7512-17-6, N-Acetylglucosamine

RL: ANT (Analyte); ANST (Analytical study)

(detn. of, in human **urine**, by high-performance anion-exchange
liq. chromatog., disease **diagnosis** in relation to)

=>